

Fact Sheet

June 2017

Program Alerts

Eligible professionals (EPs) who demonstrated meaningful use successfully in a prior year for the Medicare EHR Incentive Program can determine their participation status in the Quality Payment Program for 2017 through a look up tool on the <u>Quality Payment Program</u> website. Information will then be provided on whether or not you should participate in the Merit-based Incentive Payment System (MIPS) this year and where to find resources. If you are new to Medicare in 2017, you do not participate in MIPS. You may also be exempt if you qualify for one of the special rules for certain types of clinicians, or are participating in an <u>Advanced Alternative Payment Model (APM)</u>. To learn more, review the <u>MIPS Participation Fact Sheet</u>.

CMS recently sent letters in the mail notifying clinicians of their MIPS participation status. A sample of the letter can be found on the <u>Education page</u> of <u>https://qpp.cms.gov/</u>. This tool is another resource for clinicians to use to determine their status.

For EPs who are participating in the Medicare EHR Incentive Program for the **first time** in 2017, they must take one of the following actions by **October 1, 2017** to avoid the 2018 payment adjustment:

- 1) Attest to the Modified Stage 2 2017 EHR Incentive Program requirements; OR
- 2) Submit a one-time hardship exception application if they are transitioning to the MIPS path of the Quality Payment Program and plan to report on measures specified for the <u>Advancing Care Information</u> performance category. The one-time hardship exception application can be found <u>here</u>.

EPs that attest directly to a state Medicaid EHR Incentive Program will continue to attest to the measures and objectives finalized in the 2015 EHR Incentive Programs Final Rule (80 FR 62762 through 62955). In 2017, Medicaid EPs have the option to report to the Modified Stage 2 or Stage 3 objectives and measures. As a reminder, EPs who are eligible only for the Medicaid EHR Incentive Program are not subject to payment adjustments.

Important Dates for Eligible Professionals, Eligible Hospitals and Critical Access Hospitals:

- January 1, 2017
 Reporting year begins for Program Year 2017.
- February 28, 2017
 Last day to submit registration for Program Year 2016.
- March 13, 2017
 Medicare CY 2016 attestation deadline.
- March 28, 2017
 Appeal filing for eCQM reporting/eligibility/failed reporting MU

Important Dates for Eligible Professionals, Eligible Hospitals and Critical Access Hospitals (con't):

March 31, 2017

Last day to submit an attestation to receive an incentive payment for Program Year 2016.

• July 2017

Targeted go live date for Program Year 2017.

• December 31, 2017

Reporting year ends for Program Year 2017.

2021

Last year to receive Medicaid EHR incentive payment.

KHIE Connection

Kentucky Health Information Exchange (KHIE) is the Public Health Authority in the Commonwealth for the public health measures within the EHR Incentive Program. In order to be deemed a Meaningful User the provider must have a signed Participation Agreement and signed addendum(s) on file with KHIE for each public health objective selected for attestation. Public Health guidance is available on the EHR website as well as the KHIE website.

Governor's Office of Electronic Health Information

Kentucky Health Information Exchange

8 Mill Creek Park, Frankfort, KY 40621

Email: khie@ky.gov Phone: 502-564-7992 Web: http://khie.ky.gov

Office Hours: Monday – Friday 8 a.m. – 4:30 p.m.

Kentucky Medicaid EHR Incentive Program Status, May 30, 2017

	Registrations	Completed Attestations	Total Paid	Amount Paid
Hospitals	95	294	270	\$133,577,270.60
Providers	5,170	9,148	7,584	\$114,149,333.91
Totals	5,265	9,442	7,854	\$247,726,604.51

Kentucky Medicare EHR Incentive Program Status, July 2016

Total Payments to EPs and EHs: 10,806 Total Amount Paid: \$379,086,957.18